Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung

benefit trust or private foundation)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

A	F	or the	2012 calendar year, or tax year beginning and	l ending		
В	Cr ap	neck if plicable	C Name of organization		D Employer identifi	cation number
[Addres: change	ATLANTIC LEGAL FOUNDATION			
[Name change	Doing Business As ATLANTIC LEGAL FOUNDATION,	INC	23-2	022920
[[Initial return Termin- ated	Number and street (or P 0 box if mail is not delivered to street address) 2039 PALMER AVENUE	Room/suite 104	E Telephone numbe 914-	r 834-3322
[Amende	City, town, or post office, state, and ZIP code		G Gross receipts \$	443,683.
(Application pending			H(a) Is this a group re	
		penang	F Name and address of principal officer: WILLIAM H. SLATTER SAME AS C ABOVE	ĽΥ	for affiliates? H(b) Are all affiliates inc	Yes X No
<u> </u>			mpt status: X 501(c)(3)	or 527] If "No," attach a	list. (see instructions)
			: ► WWW.ATLANTICLEGAL.ORG		H(c) Group exemptio	
			organization X Corporation Trust Association Other	L Year	of formation 1977 N	A State of legal domicile PA
L	Pa		Summary	MIGGIO	N OF BUT 3	T 331017.0
	စ္ပ		Briefly describe the organization's mission or most significant activities: THE LEGAL FOUNDATION IS TO ADVANCE THE RULE			
SCANNED	틸	_				
	Ver		Check this box P I if the organization discontinued its operations or dispo number of voting members of the governing body (Part VI, line 1a)	osea or more	1 _	33
(3		lumber of voting members of the governing body (Part VI, line 1a) lumber of independent voting members of the governing body (Part VI, line 1b)		3	32
a a	න් ග		otal number of individuals employed in calendar year 2012 (Part V, line 2a)		5	4
Ö:	≗		otal number of individuals employed in calendar year 2012 (Fart V, line 2a)		6	63
≥ :	}		otal number of Volunteers (estimate in necessary) otal unrelated business revenue from Part VIII, column (C), line 12		7a	0.
\$	₹		let unrelated business taxable income from Form 990-T, line 34	7b	0.	
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Prior Year	Current Year
© 	ا ه	8 (Contributions and grants (Part VIII, line 1h)		658,989.	443,015.
T NOF	Ĭ,		Program service revenue (Part VIII, line 2g)		0.	0.
<u> </u>	<u>§</u>	10 li	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		526.	668.
2	-	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,198.	0.
		12 T	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		662,713.	443,683.
2013		13 (Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
			Benefits paid to or for members (Part-IX, column (A), line 4)		0.	0.
	S		alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		334,704.	334,450.
	Expenses		rofessional fundraising fees (Part IX, column (A), line 11e)		0.	0.
	유	ЬΤ	otal fundraising expenses (Part IX. column (D), line 25)	90.	154 065	162 752
•	_		Other expenses (Part IX, column (A), lines 1 ha 12 d 3 1 f-24		154,965.	163,752. 498,202.
			otal expenses. Add lines 13-17-(must-equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 1827 om line 112-		489,669. 173,044.	-54,519.
_	8	19	revenue less expenses. Subtract line 18 from line 19	- Po		End of Year
ets (d Balances	20 1	otal assets (Part X, line 16)	DE	ginning of Current Year 378, 345.	373,591.
ASS	Ba		otal assets (Part X, line 10)	-	20,425.	70,190.
Net			let assets or fund balances. Subtract line 21 from line 20		357,920.	303,401.
		rt II	Signature Block			
			ies of perjury, I declare that I have examined this return, including accompanying schedul	es and statem	ents, and to the best of m	y knowledge and belief, it is
tr	ue,	correct	and complete Declaration of preparer (other than officer) is based on all information of w	vhich preparei	r has any knowledge	•
_						·
S	ign		Signature of officer	1 .	Date	
Н	lere	,	WILLIAM H. SLATTERY, PRESIDENT	W/U	all ma	10,2013
_			Type or print name and title			
			Print/Type preparer's name	1	Date Check	PTIN
	aid	-	CHOMAS F. BLANEY	<u> </u>	3 /8 //3 self-employ	
		-	Firm's name O'CONNOR DAVIES, LLP		Firm's EIN	27-1728945
U	se (Only	Firm's address 665 FIFTH AVENUE	D	2121206 2600	
-	100	<u> </u>	NEW YORK, NY 10022		Phone no (212)286-2600 X Yes No
			S discuss this return with the preparer shown above? (see instructions) LHA For Paperwork Reduction Act Notice, see the separate instruct	ions		X Yes No Form 990 (2012)
23	32CO	1 12-10	-12 LIIA I VI FAPEIWOIK NEUUCIIVII AÇI NVIICE, SEE IIIE SEPATALE INSTRUCT			101111 330 (4014)

232002 12-10-12

(Expenses \$

SEE SCHEDULE O FOR CONTINUATION(S)

Form **990** (2012)

including grants of \$

320,495.

4e Total program service expenses ▶

Form 990 (2012) ATLANTIC LEG Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		,	
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_ '		v
_	public office? If "Yes," complete Schedule C, Part I	3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			v
_	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		v
	similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			v
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6_		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		х
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7_		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	_		х
0	Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D. Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	_ =		
10	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	10		
• •	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			Ī
_	Part VI	11a		Х
ь	Did the organization report an amount for investments other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	-	Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		l	
	Schedule D, Parts XI and XII	12a	Х	<u> </u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	l		l .
4=	or more? If "Yes," complete Schedule F, Parts I and IV	14b	 	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	4-		х
16	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	 	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	4.0	1	х
17	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	 	
"	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	17		х
18	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	 '	<u> </u>	 ^
	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	10	 	
	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	 	T-
	The state of the s		990	(2012)
				,

orm 990 (2	012) ATLANTIC	LEGAL FOUNDATION	<u> </u>	23-2022920	Page
Part IV	Checklist of Required School	edules (continued)			

				(2012)
	Note. All Form 990 filers are required to complete Schedule O	38	Х	
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	<u> </u>		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
55	If "Yes," complete Schedule R, Part V, line 2	36		X
36	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	330	<u> </u>	
Đ	if "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)2 if "Yes " complete Schedule R. Part V. line 2	35ь		
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u> </u>
25-	Part V, line 1	34	 	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and]		y
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	22		v
20	Schedule N, Part II	32	l	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete		1	v
00	If "Yes," complete Schedule N, Part I	31		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	2.5		v
24	contributions? If "Yes," complete Schedule M	30		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			v
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	<u> </u>	^
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			,,
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		<u> </u>
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		<u>X</u> _
	instructions for applicable filing thresholds, conditions, and exceptions):			
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			_
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			
	Schedule L, Part I	25b		X
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
	any tax-exempt bonds?	24c		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Schedule K If "No", go to line 25	24a		X
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	Schedule J	23	X	
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			:- -
~ 1	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the	-	162	140

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		-	į
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			Ė
	(gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 4			İ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3ь		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶			ł
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u>	· 	X
Ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	ļ	Х
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	<u> </u>	
ба	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	0		х
.	any contributions that were not tax deductible as charitable contributions?	6a		
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	00		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c	}	X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	<u> </u>	<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	ļ	<u> </u>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			-
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	ļ	ļ
9	Sponsoring organizations maintaining donor advised funds.	_		ŀ
a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			1
a	Initiation fees and capital contributions included on Part VIII, line 12 Cross recently included as Form 200, Both VIII, beautiful and the form of th			
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(a)(12) organizations. Enter:			1
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders	1		
	Gross income from other sources (Do not net amounts due or paid to other sources against			1
Ŭ	amounts due or received from them.)]
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	1	1
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			<u> </u>
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		1
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			1
	organization is licensed to issue qualified health plans			1
c	Enter the amount of reserves on hand	<u> </u>	L	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	<u>L</u>	<u> </u>
		Forn	ո գգո	(2012)

232005 12-10-12

ATLANTIC LEGAL FOUNDATION 23-2022920 Form 990 (2012) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions XCheck if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 33 1a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O 32 b Enter the number of voting members included in line 1a, above, who are independent 1h Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X 2 officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision X of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or 7a X more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or Х 7b persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8a X b Each committee with authority to act on behalf of the governing body? 8ь Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the Х organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) No Yes Х 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with the organization's exempt purposes? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X 12b b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X 13 13 Did the organization have a written whistleblower policy? Х 14 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a X 15b b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed CA, MD, NJ, NY, PA, WV, CT, MA, VA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Upon request Own website X Another's website Other (explain in Schedule O) Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization.

Form 990 (2012)

17552

ROSEMARY L. WEBBER "ACCOUNTANT" - (717)653-5920

1537 EMERSON DRIVE, MOUNT JOY,

232006 12-10-12

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees, and former such persons.

(A) Name and Title	(B) Average hours per	(do	not c	Pos heck ss pe	tion more	than	one th an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional frustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) WILLIAM H. SLATTERY	40.00									
PRESIDENT AND DIRECTOR		X		Х				87,360.	0.	2,527.
(2) HAYWARD D. FISK	2.50	1								
CHAIRMAN OF THE BOARD		X		X	<u> </u>	<u> </u>		0.	0.	0.
(3) DOUGLAS FOSTER	1.00									
VICE CHAIRMAN -	~	X		X		-	-	0.	0.	0.
(4) DAVID E, WOOD	1.00						-			
TREASURER AND DIRECTOR		X		Х				0.	0.	0.
(5) CHARLES R. WORK	1.00			İ						
DIRECTOR		X				<u> </u>		0.	0.	0.
(6) THOMAS E. BIRSIC	1.00					•				
DIRECTOR		X	L					0.	0.	0.
(7) AUGUSTUS I. DUPONT	1.00									•
SECRETARY AND DIRECTOR		X		Х	L			0.	0.	0.
(8) GEORGE S. FRAZZA	1.00									
DIRECTOR		X		<u> </u>	L	_		0.	0.	0.
(9) WILLIAM H. GRAHAM	1.00									
DIRECTOR		X					<u> </u>	0.	0.	0.
(10) DONALD M. GRAY	1.00]								- "
DIRECTOR		X						0.	0.	0.
(11) ROBERT L. HAIG	1.00									
DIRECTOR		X						0.	0.	0.
(12) JOE G. HOLLINGSWORTH	1.00]								
DIRECTOR		X				_		0.	0.	0.
(13) R. WILLIAM IDE	1.00				1					
DIRECTOR		X						0.	0.	0.
(14) FRANK R. JIMENEZ	1.00		ļ							
DIRECTOR		X						0.	0.	0.
(15) ROBERT E. JUCEAM	1.00]								
DIRECTOR		X	L_	<u> </u>				0.	0.	0.
(16) EDWIN L. LEWIS	1.00]								
DIRECTOR		X		L	L_	_	L	0.	0.	0.
(17) ROBERT A. LONERGAN	1.00]			1					
DIRECTOR		X			L_			0.	0.	0.

232007 12-10-12

Form **990** (2012)

(A)	(B)	(C) Position						(D)	(E)						
			not c	heck	more	than		Reportable	Reportable			tımate			
	week					is bot or/trus			compensation from related			nount o other	ot .		
	(list any	ğ			T		Γ	the	organizations			omer pensa	tion		
	hours for	director				B			(W-2/1099-MISC	2)		om the			
	related	158 0	Sta			arsa		(W-2/1099-MISC)	•		org	anızatı	on		
	organizations		돌		8	Ē.					and	d relate	ed		
	below line)	Individual	Institutional	Officer	Key employee Highest compensated employee		Ē				orga	ınızatıd	ons		
(18) VINCENT A. MAFFEO	1.00	를	를	8	\$	₹5	1 12	- 							
DIRECTOR		Х						0.		0.			0.		
(19) FRANK H. MENAKER, JR.	1.00						Π								
DIRECTOR		Х		Ì			İ	0.		0.					
(20) GREGORY J. MORROW	1.00														
DIRECTOR		X		<u> </u>				0.		0.			0.		
(21) ERNEST T. PATRIKIS	1.00														
DIRECTOR		X	L		_	<u> </u>	L	0.		0.			0.		
(22) NEVIN SANLI	1.00				ļ		-						_		
ASSISTANT TREASURER AND DIRECTOR		X	ļ	X	<u> </u>	ļ	_	0.		0.			0.		
(23) PHILIP R. SELLINGER	1.00												•		
DIRECTOR	1 00	Х			_	<u> </u>	-	0.		0.			0.		
(24) JEPFREY S. SHERMAN	1.00									ا ۸			^		
DIRECTOR	1 00	X	!	<u> </u>		╁	-	0.		0.			0.		
(25) CLIFFORD B. STORMS	1.00	J						0.		^			^		
DIRECTOR	1.00	X				╁	+	0.		0.			0.		
(26) STEPHEN J. HARMELIN	1.00	X						0.		0.	ı		0.		
1b Sub-total	<u></u>	Λ	L_	L	L	_	L	87,360.		0 .		2,5			
c- Total from continuation sheets to Part V	Il Section A			_				177,969.		0.		3,0			
d Total (add lines 1b and 1c)	n, occion A					•		265,329.		Ö.		5,5			
Total number of individuals (including but n	ot limited to th	ose	liste	ed a	bov	e) w	ho	 	0.000 of reportable						
compensation from the organization						-,		•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				1		
								· · · · · · · · · · · · · · · · · · ·				Yes	No		
3 Did the organization list any former officer,	director, or tru	uste	e, ke	y er	nplo	oyee	, 0	r highest compensated e	mployee on			1			
line 1a? If "Yes," complete Schedule J for s	uch individual										3		X		
4 For any individual listed on line 1a, is the su	ım of reportab	le co	omp	ensa	atior	n an	d o	ther compensation from	the organization						
and related organizations greater than \$15	0,000? If "Yes,	" со	mpl	ete :	Sch	edul	e J	for such individual		1	4	X			
5 Did any person listed on line 1a receive or	accrue compe	nsat	ion i	rom	any	y uni	rela	ated organization or indiv	idual for services		i				
rendered to the organization? If "Yes," con	plete Schedul	e J 1	or s	uch	per	son					5		<u>X</u>		
Section B. Independent Contractors															
 Complete this table for your five highest co the organization. Report compensation for 										ens	ation 1	rom			
(A)	me calendar y	eai	CHU	ng v	AILLI	OI W	/((1)	(B)	year.		(0	<u></u>	· · · · ·		
Name and business	address	N	ONI	E				Description of s	services	С		nsatio	n		
								<u> </u>					_		
- <u></u>															
				<u>-</u>											
2 Total number of independent contract == /	including but -		- to 10					d above) who saccined	nore then						
2 Total number of independent contractors (\$100,000 of compensation from the organi		iOt II	mie	iu (C	u IQ	,se ∥ ()	ຮເ€	apove, who received r	nore man						
		ΪŢΙ	NU	<u>ል</u> ጥ	io	N :	SF	HEETS			Form	990 (2012\		
SEE PART VII, SECTION A CONTINUATION SHEETS 232008 12:10-12								. 51111	(, _ ,					

					L FOUNDA.	LION		23-2022	920 Page 9
Pa	rt V	111	Statement of Reve	nue					
			Check if Schedule O cont	tains a response	to any question in				
				,		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts	1	а	Federated campaigns	1a				-	
흔			Membership dues	1b					
ع ت			Fundraising events	1c					
ar its			Related organizations	1d					ļ.
o.≣			Government grants (contribute	 					‡
Sign			All other contributions, gifts, gran						į
漢호		•	similar amounts not included abo	1 1	443,015.				1
ξŏ		_			113/013.				•
Contributions, Gifts, Grants and Other Similar Amounts		-	Noncash contributions included in lines Total. Add lines 1a-1f	s 1a-1r \$		443,015.			
- 1			Total. Add lines a-11		Business Code	113/013.			
	2	•			Business Code				İ
Program Service Revenue		b							<u> </u>
Se		c				·			
E S		d							
ğœ		_			· · · · · · · · · · · · · · · · · · ·				
F.		f	All other program service revo	90116					
			Total. Add lines 2a-2f	citac	•	· · ·			
	3	3	Investment income (including	dividends intere					
	Ŭ		other similar amounts)	, dividends, mich	>	668.			668.
	4		Income from investment of ta	ex-exempt bond r	proceeds				
	5 Royalties								
	•		, io, amos	(i) Real	(II) Personal				
	6	а	Gross rents	Wille	(1)				1
	_	b	Less: rental expenses						1
			Rental income or (loss)						
			Net rental income or (loss)		•				Ī
	7		Gross amount from sales of	(i) Securities	(ii) Other				
			assets other than inventory						1
		b	Less: cost or other basis						
			and sales expenses						1
		c	Gain or (loss)	[1
		d	Net gain or (loss)		•				
<u>o</u>	8	а	Gross income from fundraising	ng events (not					
Other Revenue			including \$	of					
Š			contributions reported on line						1
er			Part IV, line 18	a					
동		b	Less: direct expenses	b					1
			Net income or (loss) from fun					****	
	9	а	Gross income from gaming a	ctivities. See					1
			Part IV, line 19	а					1
			Less: direct expenses	. b	· L				-
			Net income or (loss) from gar		>				<u> </u>
	10	а	Gross sales of inventory, less	s returns					1
			and allowances	а					[
			Less cost of goods sold	b	·				-
		Ç	Net income or (loss) from sale		, >	·····	ļ		ļ
			Miscellaneous Reveni	ue	Business Code				1
	11						-	· · ·	<u> </u>
		b	45 H						
		C	All sab sure						ļ
		d	All other revenue						
	40	е	Total. Add lines 11a-11d	•		443,683.	0.	0.	668.
	12		Total revenue See instructions		- 1	333,003.	J •	· .	·

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response to any question in this Part IX (D) Do not include amounts reported on lines 6b, Total expenses Fundraising Program service Management and 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 Grants and other assistance to individuals in the United States. See Part IV, line 22 3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 270,908. 203,181. 32,508. 35,219. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 5,431. 41,785 31,339 5,015. Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 639 479 77. 83. 9 Other employee benefits 21,118 15,838. 2,534. 2,746. Payroll taxes Fees for services (non-employees): a Management 7,354 7,354. **b** Legal 14,000 14,000 c Accounting Lobbying Professional fundraising services See Part IV, line 17 -Investment management fees -g Other. (If line 11g amount exceeds 10% of line 25, 25,965 1,678. 23,096. 1,191. column (A) amount, list line 11g expenses on Sch O) 12 Advertising and promotion 32,214 11,557. 5,163. 15,494. 13 Office expenses 14 Information technology 15 Royalties 32,453 5,192. 5,625. 43,270. 16 Occupancy 8,291 4,904. 1,473. 1,914. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 12,451. 1,740. 10,310. 401. 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 7.762 6,922. 840. 23 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) 6,847 2,028 4,819. MISCELLANEOUS 5,598. 3,050. 367. 2,181 DUES AND SUBSCRIPTIONS c d All other expenses 73,290. 498,202. 320,495. 104,417. Total functional expenses. Add lines 1 through 24e Joint costs Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here I if following SOP 98-2 (ASC 958-720)

Part X	Balance Sheet				
	Check if Schedule O contains a response to any question	n in this Part X			
			(A) Beginning of year		(B) End of year
1	Cash · non-interest-bearing		21,058.	1	19,991
2	Savings and temporary cash investments	337,742.	2	309,110	
3	Pledges and grants receivable, net		1,000.	3	21,000
4	Accounts receivable, net	4,737.	4	137	
5	Loans and other receivables from current and former offi	cers, directors,			
	trustees, key employees, and highest compensated emp	loyees. Complete			
	Part II of Schedule L			5	
6	Loans and other receivables from other disqualified pers	ons (as defined under			
- 1	section 4958(f)(1)), persons described in section 4958(c)		1		
	employers and sponsoring organizations of section 501(
	employees' beneficiary organizations (see instr) Complete	1		6	
3 7	Notes and loans receivable, net			7	
7 8	Inventories for sale or use	Ì		8	
9	Prepaid expenses and deferred charges		5,778.	9	15,323
1	Land, buildings, and equipment: cost or other	l l			
132	basis. Complete Part VI of Schedule D 10a	ĺ		1	
ь	Less: accumulated depreciation 10b			10c	7
11	Investments - publicly traded securities			11	
12	Investments - other securities. See Part IV, line 11			12	
13	Investments - program-related. See Part IV, line 11		13		
14	Intangible assets		14		
15	Other assets See Part IV, line 11	8,030.	15	8,030	
16	Total assets. Add lines 1 through 15 (must equal line 34	378,345.	16	373,591	
17	Accounts payable and accrued expenses		20,425.	17	26,950
18	Grants payable	Ì		18	
-19-	Deferred revenue		19	43,240	
20	Tax-exempt bond liabilities		20		
1	Escrow or custodial account liability. Complete Part IV of	·-· · · · · · · · · · · · · · · · · · ·	21		
21 22	Loans and other payables to current and former officers,	F			
	key employees, highest compensated employees, and d				
Ĭ	Complete Part II of Schedule L	isquamico personis.		22	
23	Secured mortgages and notes payable to unrelated third	Inarties		23	
24	Unsecured notes and loans payable to unrelated third pa	·		24	
25	Other liabilities (including federal income tax, payables to	r		2-4	
20	parties, and other liabilities not included on lines 17-24).	1			
	Schedule D	complete rart x or		25	
26	Total liabilities. Add lines 17 through 25	<u> </u>	20,425.	26	70,190
<u></u>	Organizations that follow SFAS 117 (ASC 958), check	here ► X and	20/120.	20	
م	complete lines 27 through 29, and lines 33 and 34.	nere P (22) and			
27 28 29 30 31 32	Unrestricted net assets		327,920.	27	287,651
28	Temporarily restricted net assets	1	30,000.	28	15,750
29	Permanently restricted net assets	ŀ	307000.	29	13,130
5 2	Organizations that do not follow SFAS 117 (ASC 958),	shock hors		29	
;	and complete lines 30 through 34.	CHOCK HELE P			
30	Capital stock or trust principal, or current funds	1		20	
30		fund		30	
31	Paid-in or capital surplus, or land, building, or equipment			31	
2 32	Retained earnings, endowment, accumulated income, or	omer iunos	357,920.	33	303,401
33	Total habition and act coasts/fixed balances	}	378,345.	_	373,591
34	Total liabilities and net assets/fund balances		3/0,343.	34	Form 990 (201

Form 990 (2012)

Both consolidated and separate basis

Form **990** (2012)

X

X

2c

За

X Separate basis

Act and OMB Circular A-133?

Consolidated basis

review, or compilation of its financial statements and selection of an independent accountant?

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

2012

Open to Public Inspection

Name of the organization

ATLANTIC LEGAL FOUNDATION

Employer identification number 23–2022920

	STE	Neason	or Fublic Olia	rity Status (All organiz	ations mu	si complet	e uns pan	1) 366 11121	luctions					
The	organ	ization is not a	private foundation	because it is: (For lines 1	through	11, check	only one b	юх.)						
1		A church, cor	nvention of church	es, or association of churc	ches desc	ribed in se	ction 170	(b)(1)(A)(i)						
2		A school des	cribed in section 1	70(b)(1)(A)(ii). (Attach Sc	hedule E.)									
3		A hospital or	a cooperative hosp	ortal service organization of	described	in section	170(b)(1)	(A)(iii).						
4		A medical res	search organization	operated in conjunction	with a hos	pital descr	ıbed ın se	ction 170	(b)(1)(A)(ii	ii). Enter	the hospital	's nan	ne,	
		city, and stat	e:											
5		An organizati	on operated for the	benefit of a college or ur	niversity ov	wned or op	erated by	a governi	mental uni	t describ	ed in			
		section 170	(b)(1)(A)(iv). (Comp	lete Part II.)	-		-							
6				nent or governmental unit	described	d ın sectio	n 170(b)(I)(A)(v).						
7	X		-	cerves a substantial part					r from the	general	public desc	nbed	ın	
		-	b)(1)(A)(vi). (Compl	•							•			
8				section 170(b)(1)(A)(vi).	(Complete	Part II.)								
9	\sqcap	•		ceives: (1) more than 33 1	•	•	rom contri	butions, m	nembershi	n fees, a	nd aross rea	celots	from	
-		-		, ,						•	=	-		
		activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975												
		See section 509(a)(2). (Complete Part III.)												
10				operated exclusively to te	st for publ	ıc safety. S	See sectio	n 509(a)(4	I).					
11	一	-	=	perated exclusively for th	•				-	v out the	e purposes c	of one	or	
•		-	_	ations described in section						-			-	
				g organization and comple				-,. 000 001		- /(- /				
		a Type I				nctionally i			Tvo	e III - No	n-functional	lv inte	orated	
e				at the organization is not								-	_	
		-		than one or more publicly				- '			-			
f				itten determination from t						3(4)(1) 01	350(1011 000	, (4)(2).		
•			rganization, check t			at it is a Ty	pc 1, 13pc	. II, OI 1 ypc	· '''					
	ı		-	organization accepted ar	ov aft or co	ontribution	from any	of the follo	owing ner	sons?		•		
9	ı			directly controls, either al							,	Yes	No	
		•	•	supported organization?	one or tog	etilei Witii	persons	Jeschbed i	iii (ii) aiio (iii) Delow	11g(i)	163	140	
		-		on described in (i) above?							11g(ii)		1	
			•	**		•2					1	1	 	
				a person described in (i) o							11g(iii)	L	ــــــ	
h		Provide the i	ollowing information	n about the supported or	ganization	(S).								
				T	(iv) is the s	organization	(v) Did vo	u notify the	(vi) is	the				
(1)		of supported	(iı) EIN	(iii) Type of organization (described on lines 1-9		sted in your		tion in col	organizáti	on in col	(vii) Amouni		netary	
	orga	inization		above or IRC section	1 ,,	document?		r support?	(i) organiz U S	ea in the	Sup	port		
				(see instructions))	Yes	No	Yes	No	Yes	No	1			
					1.00	 				 				
				<u> </u>		 		 	 	+				
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232021 12-04-12

Form 990 or 990-EZ.

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2012

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	608,735.	426,247.	376,224.	658,989.	443,015.	2,513,210.
2	Tax revenues levied for the organ-						,
	ization's benefit and either paid to						
	or expended on its behalf			_			
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	608,735.	426,247.	376,224.	658,989.	443,015.	2,513,210.
5	The portion of total contributions				İ		
	by each person (other than a]					
	governmental unit or publicly	1					
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,	j					
	column (f)]					600,924.
6	Public support. Subtract line 5 from line 4						1,912,286.
	ction B. Total Support				t		
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 4	608,735.	426,247.	376,224.	658,989.	443,015.	2,513,210.
8		,				· · · · · · · · · · · · · · · · · · ·	, , , , , ,
•	dividends, payments received on	-			ļ	İ	
	securities loans, rents, royalties						
	and income from similar sources	12,500.	17,350.	- 484.	526.	668.	25,528.
9	Net income from unrelated business						
·	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital				·		
	assets (Explain in Part IV.)	24,648.					24,648.
11	Total support. Add lines 7 through 10	21/010.					
	Gross receipts from related activities,	oto (ooo instructi	200)		<u> </u>	12	$\frac{2,563,386.}{153,561.}$
				d fourth or fifth to			133/301.
13	First five years. If the Form 990 is for organization, check this box and stop	=	s iirst, second, triii	a, tourin, or min to	ax year as a sectio	n 50 i (c)(3)	▶□
Sec	ction C. Computation of Publ		rcentage				
	Public support percentage for 2012 (column (f))		14	74.60 %
	Public support percentage from 2011		-	,0.a,1,,,		15	72.60 %
	33 1/3% support test - 2012. If the	·	· ·	n line 13 and line	14 is 33 1/3% or n	<u> </u>	
	stop here. The organization qualifies	-			14 13 00 170 70 01 11	nore, check this be	► X
ь	33 1/3% support test - 2011. If the		•		l line 15 ic 33 1/394	or more check th	
_	and stop here. The organization qual				111116 13 13 33 1/3 /	o or more, check to	■
172	10% -facts-and-circumstances tes	•	• •		a 13 16a or 16b /	and line 14 is 10%	or more
	and if the organization meets the "fac						
	•			•	•	rt iv now the organ	IIZALION
	meets the "facts-and-circumstances"		•	. ,	. •	47db 4F	100/
C	10% -facts-and-circumstances tes	_					
	more, and if the organization meets the				•		,
40	organization meets the 'facts-and-circ		-				
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17l			
					Sche	edule A (Form 990	or 990-EZ) 2012

Schedule A (Form 990 or 990-EZ) 2012 Part III Support Schedule for Organizations Described in Section 509(a)(2)

Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to	2
auglifu under the tests listed below, pieces complete Part II.)	

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	Include any *unusual grants *)	L					
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						<u> </u>
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge				ļ		
6	Total. Add lines 1 through 5					 	
	Amounts included on lines 1, 2, and		†··			 	
•	3 received from disqualified persons					İ	
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
(Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6		<u> </u>				
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
t	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b					 	
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12)			L			
14	First five years. If the Form 990 is for	r the organization'	s first, second, thi	rd, fourth, or fifth	tax year as a secti	on 501(c)(3) organi	zation,
	check this box and stop here	 					<u>▶</u>
<u>Se</u>	ction C. Computation of Publ	<u>ic Support Pe</u>	rcentage			.,	
15	Public support percentage for 2012 (line 8, column (f) d	divided by line 13,	column (f))		15	%
	Public support percentage from 2011				<u>.</u>	16	%
<u>Se</u>	ction D. Computation of Inve	stment Incom	<u>ne Percentage</u>				
17	Investment income percentage for 20)12 (line 10c, colu	mn (f) divided by li	ne 13, column (f))		17	%
18	Investment income percentage from					18	%
198	33 1/3% support tests - 2012. If the	organization did r	not check the box	on line 14, and lin	ne 15 is more than	33 1/3%, and line	17 is not
	more than 33 1/3%, check this box a	nd stop here. The	e organization qua	lifies as a publicly	supported organi	zation .	▶ []
t	33 1/3% support tests - 2011. If the						. —
	line 18 is not more than 33 1/3%, che		_				· . ▶∐
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t			▶□
2320	23 12-04-12			1.6	Sc	hedule A (Form 99	90 or 990-EZ) 2012

12510503 756359 621960

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

	ATLANTIC LEGAL FOU			<u>_</u>	23-202292	
Pai	t I Organizations Maintaining Donor Advise	ed Funds or	r Other Similar Fund	ls or Ac	counts. Complete if the	
	organization answered "Yes" to Form 990, Part IV, lin					
			nor advised funds	(b) Funds and other account	ts
1	Total number at end of year					
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year)					
4	Aggregate value at end of year	ļ				
	•	Lumino that th	a consta hald in donor adv	upped fund		
5	Did the organization inform all donors and donor advisors in	_		isea iuna		□ No
_	are the organization's property, subject to the organization's				Yes .	NO
6	Did the organization inform all grantees, donors, and donor a		-		•	
	for charitable purposes and not for the benefit of the donor of	or donor advis	or, or for any other purpos	e conterri		
F	impermissible private benefit?				Yes	No_
Pa				Part IV, II	ne 7.	
1	Purpose(s) of conservation easements held by the organizat	tion (check all t	hat apply).			
	Preservation of land for public use (e.g., recreation or e	education)	Preservation of an h	ustoncally	important land area	
	Protection of natural habitat		Preservation of a ce	rtified his	tonc structure	
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a quali	ified conservat	ion contribution in the forr	n of a cor	nservation easement on the	e last
	day of the tax year.					
					Held at the End of the	Tax Year
а	Total number of conservation easements	_		Γ	2a	
ь	Total acreage restricted by conservation easements	·			2b	
c	Number of conservation easements on a certified historic sti	ructure include	ed in (a)	Ī	2c	
d	Number of conservation easements included in (c) acquired		· •	Stura		
u	listed in the National Register				_	
	_	danced avenue	unch and are townson at and but the	L		
3	Number of conservation easements modified, transferred, re	eleased, exting	uisned, or terminated by t	ne organi.	zation during the tax	
	year -	1				
4	Number of states where property subject to conservation ea			-		
5	Does the organization have a written policy regarding the pe		ng, inspection, handling o	ıT		<u></u>
	violations, and enforcement of the conservation easements				└ Yes	∟l No
6	Staff and volunteer hours devoted to monitoring, inspecting			_		
7	Amount of expenses incurred in monitoring, inspecting, and					
8	Does each conservation easement reported on line 2(d) abo	ive satisfy the i	requirements of section 17	70(h)(4)(B)	·· ——	
	and section 170(h)(4)(B)(ii)?				L Yes	∟ No
9	In Part XIII, describe how the organization reports conservat	tion easements	in its revenue and expens	se statem	ent, and balance sheet, a	nd
	include, if applicable, the text of the footnote to the organiza	ation's financia	l statements that describe	s the orga	anization's accounting for	
	conservation easements.	· · · · · · · · · · · · · · · · · · ·				
Pai	t III Organizations Maintaining Collections of	of Art, Histo	orical Treasures, or	Other S	Similar Assets.	
	Complete if the organization answered "Yes" to Form	n 990, Part IV, I	ine 8.			
1a	If the organization elected, as permitted under SFAS 116 (A	SC 958), not to	report in its revenue stat	ement an	d balance sheet works of a	art,
	historical treasures, or other similar assets held for public ex	chibition, educa	ation, or research in furthe	rance of p	oublic service, provide, in f	Part XIII,
	the text of the footnote to its financial statements that descri	ribes these iter	ms.			
ь	If the organization elected, as permitted under SFAS 116 (A	SC 958), to rea	oort in its revenue stateme	ent and ba	alance sheet works of art. I	historical
	treasures, or other similar assets held for public exhibition, e	•				
	relating to these items.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	oodion in roymorando or p		noo, promae are reasoning	
	(i) Revenues included in Form 990, Part VIII, line 1				> ¢	
	(ii) Assets included in Form 990, Part X				\$ \$ * * * * * * * * * *	
0			an armilar assals for the con-	·		
2	If the organization received or held works of art, historical tre			iai gain, p	provide	
	the following amounts required to be reported under SFAS	116 (ASC 958)	relating to these items:		. .	
а	Revenues included in Form 990, Part VIII, line 1				\$ \$ * * * * * * * * * *	
b	Assets included in Form 990, Part X				> \$	

Schedule D (Form 990) 2012

Schedule D (Form 990) 2012

e Other

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

Part VII Investments - Other Securities. Se	e Form 990, Part X, III	ne 12.		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of	valuation Cost or end	d-of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
(I)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related. Se	ee Form 990, Part X,			
(a) Description of investment type	(b) Book value	(c) Method of	valuation: Cost or end	d-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(8)			.=	
(9)				
(10)				***************************************
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets. See Form 990, Part X, line				,
	Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)		····		
(8)				
(9)	·-·			
(10)				
Total. (Column (b) must equal Form 990, Part X, col. (B) lin			<u> </u>	
Part X Other Liabilities. See Form 990, Part X.	line 25.	7.5.1.1	1	
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes				
(3)			4	
(4)			4	
(5)			4	
(6)			4	
			-	
(8)			4	
(9)			4	,
(10)			-	
(11)		· · · · · · · · · · · · · · · · · · ·	4	
Total. (Column (b) must equal Form 990, Part X, col. (B) lin				······································
2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the te		he organization's financia		oorts the organization's

liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2012

Schedule D (Form 990) 2012

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

ATLANTIC LEGAL FOUNDATION

Questions Regarding Compensation

Employer identification number 23-2022920

			Yes	No			
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,						
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.						
	First-class or charter travel Housing allowance or residence for personal use]				
	Travel for companions Payments for business use of personal residence						
	Tax indemnification and gross-up payments Health or social club dues or initiation fees						
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)						
ь	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or						
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b					
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,						
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2					
2							
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's						
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to		1				
	establish compensation of the CEO/Executive Director, but explain in Part III.						
	Compensation committee Written employment contract		1				
	Independent compensation consultant X Compensation survey or study Form 990 of other organizations X Approval by the board or compensation committee						
	Form 990 of other organizations X Approval by the board or compensation committee						
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing						
	organization or a related organization:						
а	Receive a severance payment or change-of-control payment?	4a	1	Х			
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	l	X			
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X			
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.						
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.	ţ					
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation						
	contingent on the revenues of:						
	The organization?	5a		X			
b	Any related organization?	5b	ļ	X			
	If "Yes" to line 5a or 5b, describe in Part III.						
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation						
	contingent on the net earnings of:			.,			
	The organization?	6a		X			
þ	Any related organization?	6b		<u></u>			
_	If "Yes" to line 6a or 6b, describe in Part III.			1			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments	_		٠,			
_	not described in lines 5 and 6? If "Yes," describe in Part III	7		X			
8	, ., ., ., ., ., ., ., ., ., ., ., ., .,	_		\ ,			
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X			
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	9					
	Regulations section 53.4958-6(c)?						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2012

Part il Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred		(E) Total of columns	(F) Compensation
		(i) Base compensation	(i) Base (ii) Bonus & (iii) Other npensation incentive compensation compensation		compensation	benefits	(B)(i)-(D)	reported as deferred in prior Form 990
(1) MARTIN S. KAUFMAN	(i)	149,969.	0.	1 0.	0.	2,440.		0.
SR VP & GENERAL COUNSEL	(ii)	0.	0.	, 0.	0.	0.	0.	0.
	(i)							
	(ii) [
	(i)							
	(ii)					•		
	(i)			_				
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

23-2022920 ATLANTIC LEGAL FOUNDATION FORM 990, PART I, DOING BUSINESS AS: ATLANTIC LEGAL FOUNDATION, INC. FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: AND EFFICIENT GOVERNMENT; FREE ENTERPRISE; INDIVIDUAL LIBERTY; SCHOOL CHOICE; AND SOUND SCIENCE. FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: IMPORTANT CASES. PERHAPS THE MOST DECISIVE DEVELOPMENT CAME IN SACKETT V. ENVIRONMENTAL PROTECTION AGENCY, WHERE A UNANIMOUS SUPREME COURT OF THE UNITED STATES HELD THAT PRIVATE PROPERTY OWNERS (WISHING TO BUILD A SINGLE FAMILY HOME ON A SMALL PLOT, HAVING RECEIVED STATE AND LOCAL APPROVALS) COULD CHALLENGE THE ISSUANCE OF AN EPA ADMINISTRATIVE COMPLIANCE ORDER IN FEDERAL COURT BECAUSE THE EPA PROVIDED NO EFFECTIVE, IMPARTIAL PRE-ENFORCEMENT REVIEW. ON BEHALF OF THE NATIONAL ASSOCIATION OF MANUFACTURERS, ATLANTIC LEGAL ARGUED THAT SUPREME COURT PRECEDENT TEACHES THAT DUE PROCESS REQUIRES A PRE-ENFORCEMENT JUDICIAL HEARING EXCEPT WHERE A GOVERNMENT AGENCY MUST ACT IN AN EMERGENCY SETTING. IN HIS CONCURRING OPINION, JUSTICE ALITO SAID THAT THE POSITION TAKEN BY THE FEDERAL GOVERNMENT IN THE CASE "WOULD HAVE PUT THE PROPERTY RIGHTS OF ORDINARY AMERICANS ENTIRELY AT THE MERCY OF ENVIRONMENTAL PROTECTION AGENCY EMPLOYEES."

ALSO IN THE SUPREME COURT, IN KOONTZ V. ST. JOHNS RIVER WATER

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 232211 01-04-13

30

GOVERNMENT COMPELLED PRIVATE SPEECH, CTIA-THE WIRELESS ASSOCIATION V.

232212 01-04-13

CITY AND COUNTY OF SAN FRANCISCO. HERE THE CITY ENACTED AN ORDINANCE
REQUIRING CELL PHONE RETAILERS TO DISPLAY POSTERS AND BROCHURES

CONTAINING THE CITY'S VIEWS AS TO THE ALLEGED HEALTH RISKS OF CELL

PHONE USE, A MATTER ABOUT WHICH THERE IS CONSIDERABLE SCIENTIFIC

DISPUTE. ATLANTIC LEGAL'S BRIEF FOCUSED ON THE DEGREE OF FIRST

AMENDMENT SCRUTINY REQUIRED WHERE THE GOVERNMENT SEEKS TO REQUIRE

PRIVATE CITIZENS TO COMMUNICATE THE GOVERNMENT'S MESSAGE, ARGUING THAT

NONE OF THE TRADITIONAL LEVELS OF SCRUTINY HAD BEEN MET; AND, THE CITY

HAD AVAILABLE NUMEROUS ALTERNATIVES TO INFORM THE PUBLIC OF ITS

CONCERNS ABOUT CELL PHONES THAT DO NOT COMPEL PRIVATE CITIZENS TO

SPEAK. THE NINTH CIRCUIT COURT OF APPEALS AGREED.

IN ANOTHER APPEAL OF NATIONAL SIGNIFICANCE, THE FOUNDATION URGED THE

SUPREME COURT TO ENFORCE AN ARBITRATION CLAUSE CONTAINING A

"CLASS ARBITRATION WAIVER," AND TO REVERSE THE HOLDING OF A DIVIDED

SECOND CIRCUIT THAT A CLASS ACTION IS THE "ONLY ECONOMICALLY FEASIBLE

WAY" FOR THE PLAINTIFF TO PURSUE A FEDERAL ANTITRUST CLAIM. THE SECOND

CIRCUIT'S RULING, WE ARGUE, RUNS COUNTER TO RECENT SUPREME COURT

PRECEDENTS AND TO LEGISLATIVE POLICY IN FAVOR OF ARBITRATION EXPRESSED

IN THE FEDERAL ARBITRATION ACT. THE CASE IS NOW BEFORE THE HIGH COURT

FOR THE THIRD TIME, AND HAS RESULTED IN THE FILING OF AN UNUSUALLY

LARGE NUMBER OF FRIENDS OF THE COURT BRIEFS.

IN THREE CASES DURING THE YEAR, ATLANTIC LEGAL CONTINUED TO CHAMPION

THE USE OF SOUND SCIENTIFIC PRINCIPLES IN THE COURTROOM - AS IT HAS FOR

MORE THAN TWO DECADES, A RECORD UNEQUALLED BY ANY OTHER PUBLIC INTEREST

LEGAL FOUNDATION. PARTICULARLY GRATIFYING WAS THE PENNSYLVANIA SUPREME

COURT'S UNANIMOUS RULING PRECLUDING BOGUS EXPERT TESTIMONY AS TO

ATLANTIC LEGAL FOUNDATION

Employer identification number 23-2022920

CAUSATION IN AN ASBESTOS LIABILITY CASE. OUR BRIEF IN BETZ V. PNEUMO ABEX LLC WAS FILED ON BEHALF OF SEVERAL PROMINENT SCIENTISTS, INCLUDING A NOBEL PRIZE WINNER IN MEDICINE, AND EXPERTS IN LUNG DISEASE AND THE EFFECTS OF ASBESTOS. THE BRIEF WAS CITED ON SEVERAL IMPORTANT POINTS IN THE COURT'S ANALYSIS AND, ACCORDING TO ONE LEADING ASBESTOS DEFENSE LAWYER, "I'VE NEVER SEEN A COURT CITE SO FREQUENTLY TO AN AMICUS BRIEF BEFORE.. IT CLEARLY MADE A DIFFERENCE."

THE BETZ RULING MAY BE PERSUASIVE IN A SUBSEQUENT PENNSYLVANIA SUPREME COURT APPEAL, RAVERT V. MONSEY PRODUCTS, ANOTHER ASBESTOS CAUSATION CASE, WHERE WE FILED A BRIEF REPRESENTING THIRTEEN SCIENTISTS INCLUDING A NOBEL LAUREATE IN CHEMISTRY AND A NOBEL LAUREATE IN MEDICINE.

IN A THIRD ASBESTOS CASE, DIXON V. FORD MOTOR COMPANY THIS TIME BEFORE THE MARYLAND COURT OF SPECIAL APPEALS, THE FOUNDATION'S BRIEF WAS FAVORABLY CITED BY THE COURT, WHICH HELD THAT THE PLAINTIFF'S "SINGLE FIBER" THEORY WAS SCIENTIFICALLY UNTENABLE.

FORM 990, PART VI, SECTION B, LINE 11: ATLANTIC LEGAL HAS ENGAGED AN OUTSIDE ACCOUNTING FIRM TO PREPARE ITS FORM 990. THE DRAFT FORM 990, PREPARED BY THE OUTSIDE ACCOUNTING FIRM, WAS PROVIDED TO THE CHAIRMAN OF THE BOARD AND EACH DIRECTOR BY ELECTRONIC MAIL PRIOR TO FILING WITH THE IRS. EACH DIRECTOR WAS ASKED TO REVIEW THE DRAFT FORM 990 AND PROVIDE COMMENTS OR QUESTIONS. THE OFFICERS OF THE FOUNDATION AND THE FOUNDATION'S BOOKKEEPING CONSULTANT WERE IN FREQUENT COMMUNICATION WITH THE FOUNDATION'S OUTSIDE ACCOUNTANTS AND AUDITORS BY ELECTRONIC MAIL AND TELEPHONE TO PROVIDE INFORMATION, RAISE QUESTIONS AND PROVIDE COMMENTS ON THE FORM 990 PRIOR TO FILING WITH THE IRS. AFTER ALL QUESTIONS AND COMMENTS HAVE BEEN 232212 01-04-13

AVAILABLE THROUGH GUIDESTAR.ORG. THE FOUNDATION'S FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC.

FORM 990, PART XII, LINE 2C:

OVERSIGHT OF AUDIT AND SELECTION OF AUDITORS

THE FOUNDATION IS GOVERNED BY A 33 MEMBER BOARD OF DIRECTORS, 32 OF 232212

Form 990 ATLANTIC									23-202	2920
Part VII Section A. Officers, Directors, Tru	ıstees, Key Er	nplo	yee	s, a	nd F	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)			(((D)	(E)	(F)
Name and title	Average			Posi				Reportable	Reportable	Estimated
Tamo and mo	hours	(cl		allt			lv)	compensation	compensation	amount of
	per	<u> </u>	1		1		',,	from	from related	other
	week					ge l		the	organizations	compensation
	(list any	ō.				S S		organization	(W-2/1099-MISC)	from the
		夏				Hignest compensated employee	H		(VV-2/1099-WIGC)	
	hours for	ě	28			뚫		(W-2/1099-MISC)	-	organization
	related	trustee or director	Institutional trustee		8 2	De de]		and related
	organizations	튵	8		Key employee	8				organizations
	below	Individual	慧	Officer	yen	8	Former			
	line)	Ē	로	ō	ᇂ	Ť	Fo			
(27) TRACY A. BACIGALUPO	1.00	i	İ							
DIRECTOR		Х	i					0.	0.	0
(28) MARCY S. COHEN	1.00			-			-			
	1.00	х			İ			0.	0.	0
DIRECTOR	1 00		├		-	ļ		0.	<u> </u>	
(29) WILLIAM G. PRIMPS (BEGAN 3/16/1	1.00]						_	
DIRECTOR		X	<u>L</u>					0.	0.	0
(30) THOMAS L. SAGER	1.00]							
DIRECTOR		Х						0.	0.	0
(31) JAY B. STEPHENS (BEGAN 3/16/12)	1.00	H								
	1.00	X						0.	0.	٥
DIRECTOR	1 00	_		-	_			V •	٧.	0
(32) WILLIAM P. COOR	1.00	1			1				_	_
DIRECTOR		X	<u> </u>					0.	0.	0
(33) ANDREA UTECHT	1.00									
DIRECTOR		Х						0.	0.	0
(34) MARTIN S. KAUFMAN	40.00					-				
	40.00	ł		х				140 060	0.	2 440
SR VP & GENERAL COUNSEL	20 00	_	-		ļ			149,969.	0.	2,440
(35) BRISCOE R. SMITH	20.00									
SR VP & COUNSEL				X				28,000.	0.	612
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Schedule A

Identification of Excess Contributions Included on Part II, Line 5

2012

** Do Not File ** *** Not Open to Public Inspection ***

Contributor's Name	Total Contributions	Excess Contributions
	185,000.	133,732
	72,450.	21,182
	78,050.	26,782
	59,300.	8,032
	105,000.	53,732
	60,000.	8,732
	400,000.	348,732
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otal Excess Contributions to Schedule A, Part II, Line 5		600,924